

Fulton County Board of Commissioners

Agenda Item Summary

BOC Meeting Date 10/15/2014

Requesting Agency

Sheriff's Office

Commission Districts Affected
All Districts

Requested Action (Identify appropriate Action or Motion, purpose, cost, timeframe, etc.)

Request approval to renew existing contract- Sheriff's Office, RFP #11RFP01272011A-CC Inmate Physical and Mental Health Services for the Fulton County Jail in the amount of \$16,213,224, with Corizon, Inc. F/K/A Correctional Medical Services to provide physical and mental healthcare services. This action exercises the fourth of four renewal options. No renewal options remain. Effective dates: January 1, 2015 through December 31, 2015.

Requirement for Board Action (Cite specific Board policy, statute or code requirement)

In accordance with Purchasing Code Section 102-394(6), the Purchasing Department shall present all renewal requests to the Board of Commissioners at least 90 days prior to the contract renewal date or 60 days if the contract term is six (6) months or less.

Is this Item Goal Related? (If yes, describe how this action meets the specific Board Focus Area or Goal)

No

Is this a purchasing item?

Yes

Summary & Background

(First sentence includes Agency recommendation. Provide an executive summary of the action that gives an overview of the relevant details for the item.)

The Sheriff's Office requests approval to renew an existing contract to provide Physical and Mental Healthcare to the inmates at the Fulton County Jail.

This contract provides both physical and mental healthcare to inmates at the jail facility and will allow the following services to continue as required under Consent Order Civil Action NO 04-C1416-MHS; intake screening, exams, sick call, optometry, dental emergency care, pharmacy, radiological, laboratory services, chemical treatment dependency program, psychological services, women's program, behavior management program, and psychological evaluations.

CURRENT CONTRACT HISTORY	BOC ITEM	DATE	DOLLAR AMOUNT
Original Award Amount	11-0439	05/18/2011	\$ 7,090,596
1 st Renewal	11-0984	12/07/2011	\$ 7,320,750
2 nd Renewal	12-0281	04/04/2012	\$ 7,320,750
2 nd Renewal	12-0808	09/19/2013	\$15,142,750
3 rd Renewal	13-0975	12/18/2014	\$15,667,068
4 th Renewal			\$16,213,224
Total Revised Amount			\$69,440,521

Agency Director Approval							
Typed Name and Title Felicia Strong-Whitaker, Interim Director	Phone (404) 612-5800	Approval					
Signature	Date						

Revised 03/12/09 (Previous versions are obsolete)

Continued

Contract & Compliance Information

(Provide Contractor and Subcontractor details.)

Contract Value: \$16,213,224.00

Prime Vendor: Corizon, Inc F/K/A Correctional Medical Services

Prime Status: Non-Minority
Location: St. Louis, MO
County: St. Louis County

Prime Value: \$14,166,521.00 or 87.38%

Subcontractor: Bio-Reference Laboratories, Inc.

Subcontractor Status: Non-Minority
Location: Elmwood Park, NJ
County: Passaic County
Contract Value: \$235.530.00 or 1.45%

Subcontractor: CharDonnay Dialysis, Inc.

Subcontractor Status: White Female Business Enterprise Non-Certified

Location: Danville, IL

County: Vermillion County **Contract Value:** \$130,542.00 or 0.81%

Subcontractor: Global Diagnostic

Subcontractor Status: African American Male Business Enterprise Certified

Location:Conyers, GACounty:Rockdale CountyContract Value:\$34.280.00 or 0.21%

Subcontractor: Recovercare, LLC
Subcontractor Status: Non-Minority
Location: Norcross, GA
County: Gwinnett County

Contract Value: \$8,894.00 or 0.05%

Subcontractor: Clinical Solutions Pharmacy

Subcontractor Status: White Female Business Enterprise Non-Certified

Location:Nashville, TNCounty:Davidson CountyContract Value:\$600,000.00 or 3.70%

Subcontractor: Bravior Healthcare Solutions

Subcontractor Status: Non-Minority Location: Atlanta, GA Fulton County Contract Value: \$235,000.00

Continued

Subcontractor: Institutional Eye Care

Subcontractor Status: Non-Minority
Location: Lewisburg, PA
County: Union County
Contract Value: \$117.00 or 0.00%

Subcontractor: Iron Mountain Record Management

Subcontractor Status: Non-Minority
Location: Royersford, PA
County: Montgomery County
Contract Value: \$1,310.00 or 0.01%

Subcontractor: Rx Reverse Distributors

Subcontractor Status: Non-Minority
Location: Sebastian, FL

County: Indian River County
Contract Value: \$166 or 0.00%

Subcontractor: Dr. Carla Dixon-Bedford

Subcontractor Status: African American Female Business Enterprise Non Certified

Location: Atlanta, GA **County:** Fulton County

Contract Value: \$77,376.00 or 0.48%

Subcontractor: Dr. Roy Brooks

Subcontractor Status: African American Male Business Enterprise Non Certified

Location: Atlanta, GA **County:** Fulton County

Contract Value: \$66,560.00 or 0.41%

Subcontractor: Dr. Joyce Crosby

Subcontractor Status: African American Female Business Enterprise Non Certified

Location: Atlanta, GA **County:** Fulton County

Contract Value: \$166,400.00 or 1.03%

Subcontractor: Mendus, Inc. (Dr. Delquis Mendoza)

Subcontractor Status: Hispanic Male Business Enterprise Non Certified

Location: Atlanta, GA **County:** Fulton County

Contract Value: \$68,900.00 or 0.42%

Subcontractor: National Correctional Medical Association (Dr. Michael Pompey)

Subcontractor Status: African American Business Enterprise Non Certified

Location: Atlanta, GA **County:** Fulton County

Contract Value: \$183,768.00 or 1.13%

Subcontractor: Memorial Family Medicine (Dr. Tassew Tesfaye)

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Continued

Subcontractor Status: African American Female Business Enterprise Non Certified

Location: Atlanta, GA **County:** Fulton County

Contract Value: \$84,864.00 or 0.52%

Subcontractor: CTV Medical Incorporated (Dr. Jose Villongco)
Subcontractor Status: Hispanic Male Business Enterprise Non Certified

Location: Atlanta, GA
County: Fulton County

Contract Value: \$137,800.00 or 0.85%

Subcontractor: Stericycle
Subcontractor Status: Non-Minority
Location: Lake Forest, IL
County: Lake County

Contract Value: \$15,196.00 or 0.09%

Total Contract Value: \$16,213,224.00 or 100 % Total M/FBE Values: \$2,046,703.00 or 12.62%

Contractor	Contractor	Contractor	Address	City	State						Amount	Percentage	Prime/Contract
Туре	Status	Name				Code	Name	Phone	Email	Approval			Value
Prime	Non- M/FBE	Corizon, Inc									\$16,213,224.00	87.38%	\$14,166,521.00
Sub	Non- M/FBE	Bio Reference Labs									\$235,530.00	1.45%	
Sub	M/FBE	CharDonnay Dialysis									\$130,542.00	0.81%	
Sub	M/FBE	Global Diagnostic									\$34,280.00	0.21%	
Sub	Non- M/FBE	Recovercare, LLC									\$8,894.00	0.05%	
Sub	WFBE	Clinical Solutions Pharmacy									\$6000,000.00	3.70%	
Sub	Non- M/FBE	Braylor Healthcare Solutions LLC									\$235,000	1.45%	
Sub	Non- M/FBE	Institutional Eye Care									\$117	0.00	
Sub	Non- M/FBE	Iron Management Record Mgmt									\$1,310.00	0.01%	
Sub	Non- M/FBE	Rx Reverse Distributors									\$166.00	0.00	
Sub	Non- M/FBE	Stericycle									\$15,196.00	0.09%	
Sub	MFBE	Dr. Bedford- Dixon,Carla									\$77,376.00	0.48%	
Sub	MBE	Dr. Roy Brooks									\$66,560.00	0.41%	
Sub	MFBE	Dr. Joyce Crosby									\$166,400.00	1.03%	

Agency Director Approval	County Manager's	
Typed Name and Title Felicia Strong-Whitaker, Interim Director	Phone (404) 612-5800	Approval
Signature	Date	

Revised 03/12/09 (Previous versions are obsolete)

	Continued											
Sub	FBE	Dr. Medoza. Delquis								\$66,900.00	0.42%	
Sub	M/FBE	Dr. Michael Pompay								\$183,768.00	1.13%	
Sub	M/FBE	Dr. Tesfay Tassew								\$84,864.00	0.52%	
Sub	M/FBE	Dr. Villongco, Jose								\$137,800.00	0.85%	
Sub	M/FBE											
Sub	M/FBE											

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Solicitation	NON-MFBE	MBE	FBE	TOTAL	
Information	INCIN-IVIEDE	INIDE	FDC	IOTAL	
No. Bid Notices Sent:					
No. Bids Received:					

Total Contract Value	\$16,213,224.00 or 100%
Total M/FBE Values	\$2,046,703.00 or 12.62
Total Prime Value	\$14,166,521.00 or 87.38

Fiscal Impact / Funding Source

(Include projected cost, approved budget amount and account number,

source of funds, and any future funding requirements.)

100-330-3302-1158: General, Sheriff, Medical Services - \$16,213,224

Exhibits Attached

(Provide copies of originals, number exhibits consecutively, and label all

exhibits in the upper right corner.)

Exhibit 1: Contract Renewal Evaluation Form

Exhibit 2: Contract Renewal Form

Exhibit 3: Contractor Performance Report

Source of Additional Information (Type Name, Title, Agency and Phone)

Flora Eatman, Financial Supervisor, (404) 612-9241

Agency Director Approval	County Manager's	
Typed Name and Title Felicia Strong-Whitaker, Interim Director	Phone (404) 612-5800	Approval
Signature	Date	

Revised 03/12/09 (Previous versions are obsolete)

Continued

Proc	urement								
Contra	ct Attached:	Previous Contracts:							
No		Yes							
Solicita	ation Number:	Submitting Agency:	Staff Contact:	Contact Phone:					
11RFP	01272011A-CC	Sheriff's Office	Leighton Graham,	404-612-6782					
			Colonel						
Descri	ption:								
		FINANC	IAL SUMMARY						
Total C	Contract Value:		MBE/FBE Participation	on:					
Origina	al Approved Amo	ount: \$ 7,090,596	Amount:	%:					
Previo	us Adjustments:	\$46,136,701	Amount:	%:					
	Request:	\$16,213,224	Amount:	%:					
TOTA		\$69,440,521	Amount:	%:					
Grant I	nformation Sun	nmary:							
Amour	nt Requested:	-	Cash						
Match	Required:		In-Kind						
Start D	Date:		Approval to Award						
End D	ate:		Apply & Accept						
Match	Account \$:		_						
Fundin	g Line 1:	Funding Line 2:	Funding Line 3:	Funding Line 4:					
100-33	0-3302-1158								
		KEY CON	ITRACT TERMS						
Start D	ate:	End Date:							
1/1/201	5	12/31/2015							
Cost A	djustment:	Renewal/Extension T	erms:						
	ROUTING & APPROVALS								
X	Originating Dep	partment:	Carter, Jimmy	Date: 8/27/2014					
	County Attorne			Date:					
X		ntract Compliance:	Strong-Whitaker, Fo						
X		t Analyst/Grants Admin		Date: 8/28/2014					
	Grants Manage			Date:					
Χ	County Manage		O'Connor, Patrick	Date: 10/9/2014					

Approved subject to BOC approval of the FY2015 Fulton County Budget. - jaf

DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE

CONTRACT RENEWAL

DEPARTMENT: Sheriff's Office

BID/RFP# DESCRIPTION: 11RFP01272011A-CC Inmate Physical & Mental Health

BID/RFP# NUMBER: 11RFP01272011A-CC

ORIGINAL APPROVAL DATE: May 18, 2011

RENEWAL PERIOD: FROM: January 1, 2015 THROUGH December 31, 2015

RENEWAL OPTION # 4 OF 4

NUMBER OF RENEWAL OPTIONS: 4

RENEWAL AMOUNT: \$16,213,224

COMPANY'S NAME: Corizon, Inc F/K/A Correctional Medical Services

ADDRESS: 12647 Olive Blvd.

CITY: St. Louis

STATE: Missouri

ZIP: 63141

SIGNATURES: SEE NEXT PAGE

SIGNATURES:

Vendor agrees to accept the renewal option and abide by the terms and conditions set forth in the contract and specifications for Bid/RFP# (Person signing must have signature authority for the company/corporation) NAME: _____(CEO, President, Vice President) _____(Print) VENDOR'S SIGNATURE: _____ DATE _____ ATTEST: NOTARY PUBLIC: TITLE: COUNTY: SEAL (Affix) MY COMMISSION EXPIRES: ATTEST: **FULTON COUNTY, GEORGIA** DATE: JOHN H. EAVES, CHAIRMAN **BOARD OF COMMISSIONERS** DATE: _____ MARK MASSEY **CLERK TO THE COMMISSION** DEPARTMENT AUTHORIZES RENEWAL OPTION ON THE AFOREMENTIONED BID/RFP: **DEPARTMENT HEAD:** (Print) DEPARTMENT HEAD SIGNATURE: _____ DATE _____ Please indicate if the following are provided: BOC Chairperson's signature required on renewals \$ 50,000.00 or more or any Bid/RFP previously approved by the Board of Commissioners of Fulton County. A copy of the current Certificate of Insurance must be attached to all renewals. Current Performance and Payment Bonds attached (If required) Minimum of four (4) signature pages required.

		INTRACTORS PERFO	DHANCE DEPORT			
	CO	PROFESSIONAL	SERVICES			
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	11RFP01272011A-CC		- X - X			
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Unsatisfactory	Corizon, Inc, F/K/A C	ents less than 50% of t	he time, not responsive, effecti	ve und/or ef	Language Language	
Poor	Incompetence, high degree	of customer dissatisfa	stion. Aurennalia responsive, effective	and or effic	ient delays require sign	
Satisfactory	udjustments to programs: k	ey employees margina	lly capable; customers somewi appropries	nd saustied. Indiar efficie	ent: delays are excusable	andro
	results in minor programs a customers indicate sutisfac	idjustments; employee: tion.	s are capable and satisfactorily	providing s	ervice without intervent	on;
Good	programe inderion kny opin	Jovens ore binhly com	Isually responsive; effective a setent and seldom require guid Immodiately responsive; highi	ance, custo	mera are nignly soushed	t.
Excellent	employees are experts and	require minimal directi	ons; custometa expectationa a	un exceened	¥ 7	
Community'			Reports/Administration - Perso			
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Positions filled to	date is 96% or (173,658 hours					
58% (112 of 194)) of the current employees have	been employed since the	ne start of the contract in 2011.			
0 4						_
neliness of Performance (- ne Completion Per Contra	-Were Milestones Met Per Con ct)	tract - Response Time	(per agreement, if applicable) -	Responsive	ness to Direction/Chang	e - On
Comments:	,024 inmates per month are med	fically screened by Coriz	on medical staff.			_
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	nmates have been tested for syp fividuals have been detoxed at the					2000
			I start for substance abuse without	awai (alcono	i, cocaine, meai, prescript	ion
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Contract Renewal Evaluation Form

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	act Renewal Evaluation Form is to be completed by	user department				
Date:	August 13, 2014					
Department:	SHERIFF'S OFFICE					
Contract Number: 11RFP01272011A-CC						
Contract Title: Inmate Physical and Mental Health Services						
Instructions:						
County with value. Ea should be maintained,	nt that every contract be rigidly scrutinized to dete ch renewal shall be reviewed and answers provid services/scope reduced, services brought in-ho omit a completed copy of this form with all renewal re-	ed to determine whether services use or if the contract should be				
 Describe what effective 	orts were made to reduce the scope and cost of	this contract.				
reflective of the cu	rsis you made to determine if the current prices irrent market. Check all applicable statements a					
internet search	of pricing for same product or service:					
	Date of search:	Click here to enter a date.				
	Price found:	Click here to enter text.				
	Different features / Conditions:	Click here to enter text.				
Percent dif	ference between internet price and renewal price:	Click here to enter text.				
Explanation / Note						
Click here to enter t	ext.					
☐ Market Survey o	of other jurisdictions:					
Date contacted		Click here to enter a date.				
Jurisdiction Nar	ne / Contact name:	Click here to enter text.				
Date of last pur	chase:	Click here to enter a date.				
Price paid:		Click here to enter text.				
Inflation rate:		Click here to enter text.				
Adjusted price:		Click here to enter text.				
Percent differer price:	nce between past purchase price and renewal	Click here to enter text.				
F - 10		☐ Yes ☐ No				

Are they aware of any new vendors?

	Are they aware of a reduction in pricing in this industry?	□ Yes	□ No
	How does pricing compare to Fulton County's award contract?	Click here to	enter text.
	Explanation / Notes:		
	Click here to enter text.		
	$\hfill\Box$ Other (Describe in detail the analysis conducted and the out	tcome):	
	Contact four (4) other correctional facilities (Dekalb, Clayton, Cobb inmate physical and mental healthcare services. The above correctinformation and did not want to discuss cost of inmate healthcare should not be determined.	tional facilities only pro	ovided limited
3.	What was the actual expenditure (from the AMS system) spent year?	for this contract for	previous fiscal
	\$14,972,796.17		
4.	Does the renewal option include an adjustment for inflation?	⊠ Yes	□ No
NOT SHOW	Was it part of the initial contract?	⊠ Yes	□ No
Da	te of last purchase:	January 1, 2014	
Pri	ce paid:	\$15,667,068	
Inf	lation rate:	Click here to enter tex	d,
Ad	justed price:	\$546,156.	
Pe	rcent difference between past purchase price and renewal price:	3.486	
Ex	planation / Notes:		
Cli	ck here to enter text.		
5.	Is this a seasonal item or service? ☐ Yes ☒ No		
6.	Has an analysis been conducted to determine if this service ca ⊠ No If yes, attach the analysis.	n be performed in-ho	ouse? □ Yes
7.	What would be the impact on your department if this contract v	was not approved?	
	Sheriff's Office would not be able to fulfill its mandated responsibility	y .	
	Flora Eatman	August 13, 2014	
	Prepared by	Date	
	Leighton Graham, Colonel	August 13, 2014	
	Department Head	Date	
	2 Contract Renewal Evaluation Form		